

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

National Association of Insurance and Financial Advisors Political Action Comm

ADDRESS (number and street)

2901 Telestar Ct.

Check if different  
than previously  
reported. (ACC)

Falls Church

VA

22042

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00005249

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)July 15  
Quarterly Report(Q2)October 15  
Quarterly Report(Q3)January 31  
Quarterly Report(YE)July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

06

01

2009

through

06

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Peter C. Brown

Signature of Treasurer

Electronically Filed by Peter C. Brown

Date

07

17

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 110

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Comm

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2009</span>		256835.75
(b) Cash on Hand at Beginning of Reporting Period .....	290007.23	
(c) Total Receipts (from Line 19) .....	91423.58	436211.02
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	381430.81	693046.77
7. Total Disbursements (from Line 31) .....	71444.91	383060.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	309985.90	309985.90
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	30109.59	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

3 / 110

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Comm

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	6	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	W	Y
0	6	3	0	2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	31063.27	103540.55
(ii) Unitemized .....	60360.31	332670.47
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	91423.58	436211.02
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	91423.58	436211.02
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	91423.58	436211.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	91423.58	436211.02

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	2244.91	28048.87	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	2244.91	28048.87	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	69250.00	354550.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	-50.00	462.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	-50.00	462.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	71444.91	383060.87	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	71444.91	383060.87	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	91423.58	436211.02
34. Total Contribution Refunds (from Line 28(d)) .....	-50.00	462.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	91473.58	435749.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2244.91	28048.87
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2244.91	28048.87

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. W. Harold Petersen

Mailing Address 24823 Los Altos Drive

City

Valencia

State

CA

Zip Code

91355-4955

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Petersen International Un-  
derwriters

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 1 / 2 0 0 9

Transaction ID: 8026966

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. W. Harold Petersen

Mailing Address 24823 Los Altos Drive

City

Valencia

State

CA

Zip Code

91355-4955

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Petersen International Un-  
derwriters

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 1 / 2 0 0 9

Transaction ID: 8026968

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Angelo T. Stath

Mailing Address 7821 Massachusetts

City

Merriville

State

IN

Zip Code

46410-5531

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Angelo T. Stath Ins. & Fi-  
nc

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8026985

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Edward R. Clink

Mailing Address 1263 W. Square Lake Rd.

City

Bloomfield Hills

State

MI

Zip Code

48302-0845

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ed Clink & Associates

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 1 / 2 0 0 9

Transaction ID: 8026991

Amount of Each Receipt this Period

125.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. David A. Culley

Mailing Address 4187 Club Drive N.E.

City

Atlanta

State

GA

Zip Code

30319-1115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nease, Lagana, Eden & Cul-  
ley Inc

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027007

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Lawrence E. Lounds

Mailing Address 2477 Valley Oaks Circle

City

Flint

State

MI

Zip Code

48532

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Security 1st Benefits Cor-  
p.

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027009

Amount of Each Receipt this Period

105.00

**SUBTOTAL** of Receipts This Page (optional) .....

272.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. T. Leslie Littleton

Mailing Address 1025 E. Austin

City

Nacogdoches

State

TX

Zip Code

75965-2964

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.50

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027027

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert M. Nelson

Mailing Address 14712 Shirley Street

City

Omaha

State

NE

Zip Code

68144-2144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Grace-Mayer Ins. Agency

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027037

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Carl James Maus

Mailing Address 432 Fort Saratoga

City

Saint Charles

State

MO

Zip Code

63303-1766

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Insurance and Investment  
Services

Occupation

Career Development Supervisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027048

Amount of Each Receipt this Period

50.40

**SUBTOTAL** of Receipts This Page (optional) .....

160.40

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. David A. Middaugh

Mailing Address 3273 Evergreen Road

City

Fargo

State

ND

Zip Code

58102-1214

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Middaugh & Associates, In-  
c.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1497.60

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027050

Amount of Each Receipt this Period

249.60

**B.**

Full Name (Last, First, Middle Initial)

Mr. Richard L. Hill

Mailing Address 2611 Alvo Road

City

Seward

State

NE

Zip Code

68434

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Unico Financial Services,  
Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027066

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. William N. Haraway

Mailing Address 113 Fairview Ave

City

Frederick

State

MD

Zip Code

21701-4017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Haraway Financial Services

Occupation

Financial Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027070

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

333.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Brian R. Phares

Mailing Address 1420 Hackberry Road

City

North Platte

State

NE

Zip Code

69101-6841

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Phares Financial Services

Occupation

Vice President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027076

Amount of Each Receipt this Period

62.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. John R. Dean

Mailing Address 1700 S.W. 15th Ave.

City

Willmar

State

MN

Zip Code

56201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Affiliated Financial Serv-  
ices Inc.

Occupation

President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027112

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. David W. Daigle

Mailing Address 5300 Stone Place Ave

City

Gillette

State

WY

Zip Code

82718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mountain West Farm Bureau

Occupation

Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

353.50

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 1 / 2 0 0 9

Transaction ID: 8027128

Amount of Each Receipt this Period

248.50

**SUBTOTAL** of Receipts This Page (optional) .....

361.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. David V. Dellinger

Mailing Address 3052 Stanton Circle

City

Carmichael

State

CA

Zip Code

95608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NAIFA - California

Occupation

Executive Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027168

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Rae Lee Olson

Mailing Address 218 N El Monte Ave

City

Los Altos

State

CA

Zip Code

94022-2354

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Vita Companies

Occupation

Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027170

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Karl Erik Hansen

Mailing Address 900 North Shoreline Boulevard

City

Mountain View

State

CA

Zip Code

94043-1933

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Vita Companies

Occupation

Brokerage Consultant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027176

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

127.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Krisann K. Mieh

Mailing Address 625 N Segoe Rd #807

City

Madison

State

WI

Zip Code

53705-3175

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blackhawk Wealth Managemen-  
nt

Occupation

Investment Advisor Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 2 / 2 0 0 9

Transaction ID: 8027257

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Donald L. Schleicher

Mailing Address 2408 N Elinor St

City

Appleton

State

WI

Zip Code

54914-2010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lifetime Retirement Plann-  
ing

Occupation

President/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 2 / 2 0 0 9

Transaction ID: 8027265

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Christopher J. Taggart

Mailing Address P.O. Box 2936

City

Cody

State

WY

Zip Code

82414-2936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Taggart Company

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 2 / 2 0 0 9

Transaction ID: 8027281

Amount of Each Receipt this Period

750.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Mark R. Warren

Mailing Address 3603 Grandview

City

Plainview

State

TX

Zip Code

79072-6625

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Warren Insurance Services

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027289

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Larry M. Lambert

Mailing Address 6915 Steeplechase Cir

City

Huntington Beach

State

CA

Zip Code

92648

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The LBL Group - Larry Lam-  
bert & Assocs

Occupation  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 3 / 2 0 0 9

Transaction ID: 8027295

Amount of Each Receipt this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Jean C. Fournier

Mailing Address P O Box 1363

City

Auburn

State

ME

Zip Code

04211-1363

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Modern Woodmen of America

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 3 / 2 0 0 9

Transaction ID: 8027299

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

1850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Jack H. Curtis

Mailing Address 1508 Morning Glory Cr.

City

Tupelo

State

MS

Zip Code

38801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United American Insurance  
Co.

Occupation

Branch Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027307

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Charles H. Landon

Mailing Address 7 Pecan Court  
Plantations East

City

Lewes

State

DE

Zip Code

19958

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Integra Administrative Gr-  
oup

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 2 / 2 0 0 9

Transaction ID: 8027321

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Hollis O. Inglett, Jr.

Mailing Address 31 Cone Rd

City

Ormond Beach

State

FL

Zip Code

32174-7903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hayward Brown Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027323

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

592.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Randhir Singh Judge

Mailing Address 45790 Cayuga Ct

City

Fremont

State

CA

Zip Code

94539-6815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Judge for Yourself Inc

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 3 / 2 0 0 9

Transaction ID: 8027326

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Lloyd M. Silver

Mailing Address 1852 Bonaza St #103

City

Walnut Creek

State

CA

Zip Code

94596-4319

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Provada

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 3 / 2 0 0 9

Transaction ID: 8027342

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Jill M. Judd

Mailing Address 7551 Arden Way

City

Aptos

State

CA

Zip Code

95003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Co.

Occupation

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 3 / 2 0 0 9

Transaction ID: 8027356

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Thomas R. Laster

Mailing Address 1713 Elmhurst Ave

City

Nichols Hills

State

OK

Zip Code

73120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rogers Benefit Group

Occupation

Regional Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027362

Amount of Each Receipt this Period

50.40

**B.**

Full Name (Last, First, Middle Initial)

Mr. Daniel J. Wells

Mailing Address 18830 Los Hermanos Ranch Rd

City

Valley Center

State

CA

Zip Code

92082-6808

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Daniel Wells Insurance &  
Financial Ser

Occupation

Owner/Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.50

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 3 / 2 0 0 9

Transaction ID: 8027372

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Ronald S. Rosbruch

Mailing Address 140 Broadway, 22nd Fl.

City

New York

State

NY

Zip Code

10005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Strategies for Wealth

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 3 / 2 0 0 9

Transaction ID: 8027406

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.40

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. W. Gary Langenhahn

Mailing Address 2 Briars Corners

City

Briarcliff Manor

State

NY

Zip Code

10510-7350

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Private Client Group, LLC

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 3 / 2 0 0 9

Transaction ID: 8027408

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Frank R. Nolimal

Mailing Address 2017 Grafton Ave

City

Henderson

State

NV

Zip Code

89014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Assurance Ltd

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027426

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael A. Lundy

Mailing Address 1289 Homestead Dr.

City

Xenia

State

OH

Zip Code

45385-7027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation

Agent/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 0 9

Transaction ID: 8027458

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

560.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Scott D. Colby

Mailing Address 7077 E. Central #8

City

Wichita

State

KS

Zip Code

67206-1929

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New England Financial

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 0 9

Transaction ID: 8027537

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Gregory G Braden

Mailing Address 933 E 1938th Rd.

City

Eudora

State

KS

Zip Code

66025-9101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Owner/Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 0 9

Transaction ID: 8027541

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard S. Hawkins

Mailing Address 2224 Karendale Circle

City

Riverside

State

CA

Zip Code

92506-5548

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Richard Hawkins Ins. Serv-  
ices

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 0 9

Transaction ID: 8027571

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

610.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. H. David Travis

Mailing Address 2225 Edinborough

City

Murray

State

KY

Zip Code

42071-2737

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 8 / 2 0 0 9

Transaction ID: 8027583

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Alex Hanson

Mailing Address 7888 Glen Finnan Cir

City

Ft Myers

State

FL

Zip Code

33912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dawson Companies

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027631

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Henry L Prien

Mailing Address 415 38th St S Ste E

City

Fargo

State

ND

Zip Code

58103-1190

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Family Life Insu-  
rance Co.

Occupation

District Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027754

Amount of Each Receipt this Period

50.40

**SUBTOTAL** of Receipts This Page (optional) .....

242.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. James W. Oglesby

Mailing Address P. O. Box 1555

City

ENKA

State

NC

Zip Code

28728

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
J.W. Oglesby & Associates

Occupation

Senior Sales Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027792

Amount of Each Receipt this Period

143.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Daniel J. Scholz

Mailing Address 3619 S 55th St

City

Omaha

State

NE

Zip Code

68106-4415

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ameritas Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027796

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Paul R. Decker

Mailing Address Box 1832

City

Idaho Falls

State

ID

Zip Code

83403-1832

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Beneficial Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027818

Amount of Each Receipt this Period

50.40

**SUBTOTAL** of Receipts This Page (optional) .....

318.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Walter C. Sprye, Jr.

Mailing Address 1305 Portside Drive

City

Wilmington

State

NC

Zip Code

28405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Advisors, LLC

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027856

Amount of Each Receipt this Period

46.20

**B.**

Full Name (Last, First, Middle Initial)

Mr. Roy W. Kern

Mailing Address 642 S. Rilynn Ave.

City

Republic

State

MO

Zip Code

65738-7540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Roy W. Kern & Associate

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027858

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Frank H. Briggs, Jr.

Mailing Address 2610 Bohler Rd NW

City

Atlanta

State

GA

Zip Code

30327-1418

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Briggs & Associates/AXA  
Advisors, LLC

Occupation

Financial Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027896

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

156.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Ronald D. Brant

Mailing Address 10234 Hoffman

City

Maybee

State

MI

Zip Code

48159-9777

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lincoln Financial Network

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027902

Amount of Each Receipt this Period

208.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Matthew S. Tassey

Mailing Address 5 Reggio Ave.

City

Old Orchard Beach

State

ME

Zip Code

04064-2709

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Burwell & Burwell

Occupation  
Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027912

Amount of Each Receipt this Period

72.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Peter Fulchiron

Mailing Address 411 San Andreas Drive

City

Novato

State

CA

Zip Code

94945-1237

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Life Insurance  
Company

Occupation  
Agency Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027914

Amount of Each Receipt this Period

105.00

**SUBTOTAL** of Receipts This Page (optional) .....

385.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Kent A. Bennett

Mailing Address 280 Hollow Road

City

Muncy

State

PA

Zip Code

17756-5789

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kent A. Bennett & Assoc.,  
Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027918

Amount of Each Receipt this Period

87.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Randy L. Scritchfield

Mailing Address 10105 Nightingale St.

City

Gaithersburg

State

MD

Zip Code

20882-4019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Montgomery Financial Grou-  
p, Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8027963

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Edward A. Zabielski, Jr.

Mailing Address 104 Clay Ct.

City

Landenberg

State

PA

Zip Code

19350

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Edward A. Zabielski Jr &  
Co.

Occupation

President/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028013

Amount of Each Receipt this Period

105.00

**SUBTOTAL** of Receipts This Page (optional) .....

242.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. John W. Collier

Mailing Address 4600 Kietzke Ln  
Ste D134

City State Zip Code  
Reno NV 89502

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American General Financial  
Group

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028029

Amount of Each Receipt this Period

50.40

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert C. Rockett, Jr.

Mailing Address 1221 Willapa First St

City State Zip Code  
Raymond WA 98577

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
R & S Financial

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028051

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Anthony D. Miller

Mailing Address 4502 Hi-Line Dr

City State Zip Code  
Billings MT 59106

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retirement Solutions

Occupation  
Financial Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028081

Amount of Each Receipt this Period

50.40

**SUBTOTAL** of Receipts This Page (optional) .....

150.80

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. James R. Coviello

Mailing Address 3412 Valley Road

City

Winston Salem

State

NC

Zip Code

27106-2529

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.60

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028085

Amount of Each Receipt this Period

23.10

**B.**

Full Name (Last, First, Middle Initial)

Mr. Charles E. Jackson, Jr.

Mailing Address 53 Jordan Lane

City

Mobile

State

AL

Zip Code

36608-2624

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McNeil, Jackson, Ahrens  
Financial Group

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028133

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard A. Koob

Mailing Address 301 Frederick Street

City

Waukesha

State

WI

Zip Code

53186-8116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Holter Financial Group

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028137

Amount of Each Receipt this Period

50.40

**SUBTOTAL** of Receipts This Page (optional) .....

116.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. James A. Buchan

Mailing Address 5716 W Orlando Cir

City

Broken Arrow

State

OK

Zip Code

74011-1149

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028141

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Shannon J. Enders

Mailing Address 5677 Westwood Drive

City

Muskegon

State

MI

Zip Code

49441

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lakeshore Employee Benefi-  
ts

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028145

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Russell D. Jenkins

Mailing Address 1988 Burlingame Rd.

City

Emporia

State

KS

Zip Code

66801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual Fin.  
Network

Occupation  
Financial Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028209

Amount of Each Receipt this Period

50.40

**SUBTOTAL** of Receipts This Page (optional) .....

152.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. H. Keith de Noble

Mailing Address 36308 Highway 300

City

Bigelow

State

AR

Zip Code

72016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
H. Keith de Noble Ins. Ag-  
ency, Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028213

Amount of Each Receipt this Period

45.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Bryon A. Holz

Mailing Address 207 Cindy Ln

City

Brandon

State

FL

Zip Code

33510-3905

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bryon Holz & Associates

Occupation

Independent Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.50

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028217

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Jeffrey J. Taggart

Mailing Address 1107 Cedar Ln.  
P.O. Box 2433

City

Cody

State

WY

Zip Code

82414-2433

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Taggart Company

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028249

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

137.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. William J. Lynch

Mailing Address 5075 SW Griffith Dr. #200

City

Beaverton

State

OR

Zip Code

97005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Farmers Insurance

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028269

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. David B. Bianchi

Mailing Address 1125 Beldon Way

City

Reno

State

NV

Zip Code

89503-3164

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028288

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Walter J. Scott

Mailing Address 1022 Washington Ave

City

Oshkosh

State

WI

Zip Code

54901-5354

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
W. F. Coe & Associates,  
LLC

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028308

Amount of Each Receipt this Period

50.40

**SUBTOTAL** of Receipts This Page (optional) .....

160.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. William James DeBruin

Mailing Address 106 Edgewood Ln

City

Combined Locks

State

WI

Zip Code

54113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
William J. DeBruin Financial Services,

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028320

Amount of Each Receipt this Period

72.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Terry M. Kaltenbach

Mailing Address 1358 Ahlrich Ave

City

Encintas

State

CA

Zip Code

92024-4029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Phoenix Life

Occupation

Wealth Management Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028330

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Larry J. Winkelhake

Mailing Address 18600 Longview Ct

City

Brookfield

State

WI

Zip Code

53045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mortensen-Winkelhake

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028352

Amount of Each Receipt this Period

90.00

**SUBTOTAL** of Receipts This Page (optional) .....

287.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 110

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Randall H. Jensen

Mailing Address 124 W 46th St., #201

City

Kearney

State

NE

Zip Code

68847

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Principal Financial  
GroupOccupation  
Sr. Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	9	

Transaction ID: 8028370

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. William T. Whitmore, Jr.

Mailing Address 3495 Winding Trail Circle

City

Virginia Beach

State

VA

Zip Code

23456

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nationwide Financial Netw-  
orkOccupation  
Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	9	

Transaction ID: 8028386

Amount of Each Receipt this Period

65.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Theodore J. Zouzounis

Mailing Address 820 Mariposa Rd

City

Lafayette

State

CA

Zip Code

94549-4211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXIA Employment Benefit  
Insurance SvcOccupation  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	9	

Transaction ID: 8028400

Amount of Each Receipt this Period

42.50

SUBTOTAL of Receipts This Page (optional) .....

150.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Carol A. Anderson

Mailing Address 717 N. 87th St.

City

Omaha

State

NE

Zip Code

68114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sharp Anderson Arena Curn-  
es & Assoc

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028404

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Gary H. Pendleton

Mailing Address 2607 Oberlin Rd  
Ste 100

City

Raleigh

State

NC

Zip Code

27608-1319

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pendleton Financial Consu-  
lting, Inc.

Occupation

President/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.98

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028408

Amount of Each Receipt this Period

45.83

**C.**

Full Name (Last, First, Middle Initial)

Mr. Thomas E. Fowler

Mailing Address 13243 SE 51st Pl

City

Bellevue

State

WA

Zip Code

98006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fowler Financial Services,  
Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028412

Amount of Each Receipt this Period

107.50

**SUBTOTAL** of Receipts This Page (optional) .....

203.33

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Vincent M. D'Addona

Mailing Address 141 Greenway Road

City

Lido Beach

State

NY

Zip Code

11561-4828

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
D'Addona Rosenbaum

Occupation

General Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028422

Amount of Each Receipt this Period

105.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Debra L. Franklin-Schatzki

Mailing Address 380 W 12th St

City

New York

State

NY

Zip Code

10014-7200

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weiser Capital Management  
LLC

Occupation

Managing Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028426

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Lanny D. Levin

Mailing Address 313 Laurel

City

Highland Park

State

IL

Zip Code

60035-2619

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lanny D. Levin Agency, In-  
c.

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028458

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

189.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Mark V. Snider

Mailing Address 44 Elmwood Place

City

Athens

State

OH

Zip Code

45701-1904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Snider, Fuller & Associat-  
es

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028484

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. April L. Howard

Mailing Address 3386 Williamsburg

City

Boise

State

ID

Zip Code

83706-5320

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Howard Insurance Agency

Occupation  
Agent/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028504

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Barton C. Pasco

Mailing Address 309 Running Cedar Lane

City

Richmond

State

VA

Zip Code

23229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pasco Financial Group, LLC

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028510

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

162.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Lawrence J. Stack

Mailing Address 28630 Glenbrook Dr

City

Southfield

State

MI

Zip Code

48034-5543

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Michigan Financial

Occupation

Financial Advisor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028524

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Ronald G. Hester

Mailing Address 261 New River Heights Rd.

City

Boone

State

NC

Zip Code

28607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lincoln Financial Network

Occupation

Division Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.50

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028526

Amount of Each Receipt this Period

46.75

**C.**

Full Name (Last, First, Middle Initial)

Mr. Randall D. Kaufmann

Mailing Address 356 Equus Drive

City

Camp Hill

State

PA

Zip Code

17011-8357

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prudential Financial

Occupation

Special Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028540

Amount of Each Receipt this Period

45.00

**SUBTOTAL** of Receipts This Page (optional) .....

166.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Marcus T. Henderson, Sr.

Mailing Address 109 Barrington Court East

City

Franklin

State

TN

Zip Code

37067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Henderson Financial Group,  
Inc.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028552

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Russell A. Smith

Mailing Address 22928 San Joaquin Drive East

City

Canyon Lake

State

CA

Zip Code

92587-7831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Torimax Financial Group,  
Inc.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1251.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028566

Amount of Each Receipt this Period

208.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard Lee Harlow

Mailing Address 12250 Angel Wing Ct

City

Reston

State

VA

Zip Code

20191-1102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Harlow Group, LLC

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028570

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

292.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Stephen G. Summerlin

Mailing Address 4014 N. W. 15th Street

City

Gainesville

State

FL

Zip Code

32605-1912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Summerlin Financial Advis-  
ors, Inc.

Occupation

Certified Financial Planner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028572

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Gary A. Bramon

Mailing Address 269 San Felipe Way

City

Novato

State

CA

Zip Code

94945-1687

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alders Financial Solutions

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028580

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. John C. Johns

Mailing Address 5141 Lilly Rd.

City

Hazlehurst

State

MS

Zip Code

39083

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southern Farm Bureau Life  
Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028618

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

134.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Cecilia H. Carlton

Mailing Address P. O. Box 636

City

Hazlehurst

State

MS

Zip Code

39083-0636

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southern Farm Bureau Life  
Insurance

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028620

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Douglas B. Massey

Mailing Address 3115 Southwest Blvd.

City

San Angelo

State

TX

Zip Code

76904-5772

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Doug Massey Financial Ser-  
vices

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028624

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Lance B. Kolbet

Mailing Address 4632 Mountain Park Rd.

City

Pocatello

State

ID

Zip Code

83202-1702

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University Financial Group

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028642

Amount of Each Receipt this Period

126.00

**SUBTOTAL** of Receipts This Page (optional) .....

211.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Martin Montefel

Mailing Address 16932 SW 5th Way

City

Weston

State

FL

Zip Code

33326-1564

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Marty Montefel

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028650

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. George B. Bryce

Mailing Address 2730 Ardon Ln

City

Casper

State

WY

Zip Code

82609-3902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Insurance Agency

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028689

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Byron Hyatt Erstad, Jr.

Mailing Address 2510 S Nantucket Way

City

Boise

State

ID

Zip Code

83706-5095

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Erstad & Company

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028751

Amount of Each Receipt this Period

50.40

**SUBTOTAL** of Receipts This Page (optional) .....

142.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Donald C. Jayne

Mailing Address 20402 Tulsa Street

City

Chatsworth

State

CA

Zip Code

91311-1723

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Executive Financial Systems

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028775

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Michael O. Brown

Mailing Address 6512 NE 113

City

Edmond

State

OK

Zip Code

73013-8351

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MassMutual Financial Group

Occupation

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028781

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Charles W. Potts

Mailing Address 12725 St. Andrews Ter

City

Oklahoma City

State

OK

Zip Code

73120-8807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MassMutual Financial Group

Occupation

Financial Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028783

Amount of Each Receipt this Period

36.00

**SUBTOTAL** of Receipts This Page (optional) .....

138.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Thomas R. Clark

Mailing Address 1603 22nd St Ste 202

City

West Des Moines

State

IA

Zip Code

50266-1410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Compensation Designs

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028809

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Stephen D. Estler

Mailing Address 2177 NE 63 St.

City

Fort Lauderdale

State

FL

Zip Code

33308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mass Mutual

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028811

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Darren Scott Mason

Mailing Address 178 Shorecliff Rd

City

Corona Del Mar

State

CA

Zip Code

92625-2648

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Advanced Benefit Systems

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.96

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028917

Amount of Each Receipt this Period

41.66

**SUBTOTAL** of Receipts This Page (optional) .....

144.16

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Debbie K. Paul

Mailing Address 4001 MacArthur Blvd Suite 300

City

Newport Beach

State

CA

Zip Code

92660-2510

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Securian Financial Network

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028953

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Daniel L. Rust

Mailing Address 114 W. Arnold

City

Bozeman

State

MT

Zip Code

59715-6129

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028987

Amount of Each Receipt this Period

90.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Kenneth E. Knox

Mailing Address Unit 9, 10 East St

City

Providence

State

RI

Zip Code

02906-3069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Penn Mutual

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8028989

Amount of Each Receipt this Period

50.40

**SUBTOTAL** of Receipts This Page (optional) .....

182.90

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Carl G. Boutwell, Jr.

Mailing Address 109 Fern Dr

City

Brandon

State

MS

Zip Code

39042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Carl Boutwell Agency

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029003

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. James O. Geitgey

Mailing Address 279 Glenmore Dr.

City

Springfield

State

OH

Zip Code

45503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Geitgey Financial Services

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029009

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard D. Vonderlage

Mailing Address 15202 Sprague St

City

Omaha

State

NE

Zip Code

68116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heritage Financial Svcs.

Occupation  
Financial Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029023

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

127.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Steven R. Markham

Mailing Address 4 Alae St.

City

Hilo

State

HI

Zip Code

96720

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Markham Insurance Services

Occupation  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029033

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. R. Jan Pinney

Mailing Address 5152 Ellington Court

City

Granite Bay

State

CA

Zip Code

95746-7188

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pinney Insurance Center,  
Inc.

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029043

Amount of Each Receipt this Period

208.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. John C. Beckwith

Mailing Address 1908 Greenbriar Drive

City

Portage

State

MI

Zip Code

49024-5787

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ohio National Fin. Servic-  
es

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029051

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

292.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. David S. Dickenson, II

Mailing Address 7535 Brigham Road

City

Gates Mills

State

OH

Zip Code

44040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dickenson & Associates

Occupation

General Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029097

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Troy J. Shreve

Mailing Address 7100 S 45th Street

City

Lincoln

State

NE

Zip Code

68516-3016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Benefit Management

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029105

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Douglas E. Aycock

Mailing Address 5113 Southwest Pkwy # 200

City

Austin

State

TX

Zip Code

78735-8915

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Aycock Financial Group

Occupation

Employee Benefit Specialist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029129

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

126.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. H. Larry Fortenberry

Mailing Address 123 Northshore Pt

City

Madison

State

MS

Zip Code

39110-7272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Executive Planning Group

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029133

Amount of Each Receipt this Period

65.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. M. Jay Einstein

Mailing Address 59 Margarete Dr.

City

Pittsgrove

State

NJ

Zip Code

08318-3015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029161

Amount of Each Receipt this Period

72.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Thomas F. Flournoy, Jr.

Mailing Address 5300 Zebulon Rd

City

Macon

State

GA

Zip Code

31210-2199

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029215

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

179.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Dennis A. Brumbaugh

Mailing Address 17 Conley Lane

City

Elma

State

WA

Zip Code

98541

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brumbaugh Insurance Servi-  
ces

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029257

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Mitchell W. Ostrove

Mailing Address 4 New King Street

City

White Plains

State

NY

Zip Code

10604-1202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Ostrove Group Inc.

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029271

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. John J. Bradley

Mailing Address 148 Grove Street

City

Westwood

State

MA

Zip Code

02090

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bradley Insurance Agency,  
Inc

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.96

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029301

Amount of Each Receipt this Period

41.66

**SUBTOTAL** of Receipts This Page (optional) .....

126.16

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. David M. Koll

Mailing Address 1612 S. 152nd Street

City

Omaha

State

NE

Zip Code

68144-5121

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mutual of Omaha

Occupation

Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029329

Amount of Each Receipt this Period

105.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Gordon T. Colburn

Mailing Address 126 Crystal Springs Road

City

San Dimas

State

CA

Zip Code

91773

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Colburn Ins. Services, In-  
c.

Occupation

President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029331

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Angelo Assad Haddad

Mailing Address 354 Garnsey Ave

City

Bakersfield

State

CA

Zip Code

93309-1849

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life

Occupation

Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029341

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

190.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Aldous Kawaiiani Paalani

Mailing Address 2219 Kaululaau Street

City

Honolulu

State

HI

Zip Code

96813-1230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Equity Insurance Services,  
Inc

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029359

Amount of Each Receipt this Period

62.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Michael J. Ables

Mailing Address PO Box 2205

City

Avila Beach

State

CA

Zip Code

93424-2205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Michael Ables Insurance  
Services

Occupation

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029369

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Ken Simons

Mailing Address 808 Thoroughbred Lane

City

Artesia

State

NM

Zip Code

88210-2232

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life Insurance

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029389

Amount of Each Receipt this Period

50.10

**SUBTOTAL** of Receipts This Page (optional) .....

155.10

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. David T. Koppa

Mailing Address 1105 Via Bolzano

City

Santa Barbara

State

CA

Zip Code

93111-1053

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cornerstone Insurance Ser-  
vices

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029429

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Morland G. McManigal

Mailing Address 5237 Sunridge Dr

City

Fairfield

State

CA

Zip Code

94534-6672

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Ins. Co.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029445

Amount of Each Receipt this Period

550.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Leonard Martin

Mailing Address 98 Tennyson Rd

City

Warwick

State

RI

Zip Code

02888-1818

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Martin & Associates

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029487

Amount of Each Receipt this Period

50.40

**SUBTOTAL** of Receipts This Page (optional) .....

642.90

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Richard J. Chandik

Mailing Address 1332 Shorebird Ln

City

Carlsbad

State

CA

Zip Code

92011-4884

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lincoln Financial Network

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029645

Amount of Each Receipt this Period

47.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Thomas C. Besselman

Mailing Address 6421 Perkins Rd #2B

City

Baton Rouge

State

LA

Zip Code

70808-4125

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Besselman & Little Ag-  
ency

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029649

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Matthew J. McAnaney

Mailing Address 4592 Bloomsbury Dr

City

Syracuse

State

NY

Zip Code

13215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Guardian Syracuse Group  
Sales

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029703

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

597.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Elwyn D. Guernsey

Mailing Address 618 Lakewood Road

City

Pensacola

State

FL

Zip Code

32507-2434

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Guernsey & Associates

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029741

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Joseph J. Maltese

Mailing Address 4176 Arikakee Court

City

Jacksonville

State

FL

Zip Code

32223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
John Hancock Della Porta  
Agency

Occupation

Investment Advisor Rep.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029799

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. F. Nicholas Kelley

Mailing Address 1323 S. 174 St.

City

Omaha

State

NE

Zip Code

68130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kelley Financial Services,  
Inc

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029921

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

126.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Queenie M. Chee

Mailing Address 833 Waika Place

City

Honolulu

State

HI

Zip Code

96825-1061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Principal Financial  
Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8029925

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Timothy J. Brungardt

Mailing Address 314 N. 5th.

City

Norfolk

State

NE

Zip Code

68701-4093

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heritage Financial Serv-  
ices

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030037

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Jerry E. Jensen

Mailing Address 190 So. 800 W.

City

Blackfoot

State

ID

Zip Code

83221-6132

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jensco, Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030049

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

99.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Daniel L. Lawrence

Mailing Address 5553 Peters Drive

City

West Bend

State

WI

Zip Code

53095

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Modern Woodmen of America

Occupation

Agency Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030099

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Casey C. Knake

Mailing Address 2902 Mach I Dr.

City

Norfolk

State

NE

Zip Code

68701-3238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heritage Financial Services, LLC

Occupation

Investment Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030123

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Harlynn N. Bjerke

Mailing Address P. O. Box 144

City

Adams

State

ND

Zip Code

58210-0144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mutual of Omaha Companies

Occupation

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030153

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

132.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Jaford D. Burgad

Mailing Address 3842 N. 10th St.

City

Fargo

State

ND

Zip Code

58102-1044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mutual of Omaha Companies

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030155

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Alan C. Kifer

Mailing Address 21500 Park Row Rd  
#1115

City

Katy

State

TX

Zip Code

77449-2431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AIG American General

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030313

Amount of Each Receipt this Period

210.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Keith M. Gillies

Mailing Address 109 W. Lakeview Dr.

City

La Place

State

LA

Zip Code

70068-2427

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
River Parishes Advisors  
Group, LLC

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030343

Amount of Each Receipt this Period

105.00

**SUBTOTAL** of Receipts This Page (optional) .....

345.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Douglas Austin

Mailing Address Suite 9 Kite Hill Rd

City

Santa Cruz

State

CA

Zip Code

95060-1418

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Austin Ins & Financial Se-  
rv

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030347

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Richard L. Miller

Mailing Address 1214 Karr Ave.

City

Yakima

State

WA

Zip Code

98902-5026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual Finan-  
cial Network

Occupation  
Financial Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030351

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Ms. Juli Y. McNeely

Mailing Address S764 Hanson Road

City

Spencer

State

WI

Zip Code

54479

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McNeely Financial Services  
Inc

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030373

Amount of Each Receipt this Period

51.00

**SUBTOTAL** of Receipts This Page (optional) .....

136.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Glenn P. Deal, Jr.

Mailing Address 58 Golf Course Ln.

City

Taylorsville

State

NC

Zip Code

28681-7847

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thrivent Financial for Lu-  
therans

Occupation

Financial Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.50

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030489

Amount of Each Receipt this Period

68.75

**B.**

Full Name (Last, First, Middle Initial)

Mr. John Everett

Mailing Address 531 Daniel

City

Santa Maria

State

CA

Zip Code

93454

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Life Insurance  
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030525

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. James L. McConathy, Jr.

Mailing Address 706 Trenton St., Apt. 6

City

West Monroe

State

LA

Zip Code

71291

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MetLife Financial Services

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030587

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

160.75

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 57 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Robert A. Berg

Mailing Address 1405 Blackberry Lane

City

Stevens Point

State

WI

Zip Code

54481-9140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Planning Concepts Inc.

Occupation

Sales Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030649

Amount of Each Receipt this Period

36.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Samuel H. Hazleton, IV

Mailing Address 4220 Lakeshore Drive

City

Diamond Point

State

NY

Zip Code

12824

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030705

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. James R. Goodrich

Mailing Address 1860 Beech

City

Mt. Pleasant

State

MI

Zip Code

48858-1280

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030719

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

138.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Lance P. Franczyk

Mailing Address 3009 Alyssum Ct.

City

Edmond

State

OK

Zip Code

73034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oklahoma City Group

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030773

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Steven B. Heinz

Mailing Address 1341 E 600 N

City

Orem

State

UT

Zip Code

84097

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
S. B. HEINZ & ASSOCIATES,  
INC.

Occupation

Financial Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030811

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Gregory G Braden

Mailing Address 933 E 1938th Rd.

City

Eudora

State

KS

Zip Code

66025-9101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Owner/Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030837

Amount of Each Receipt this Period

25.20

**SUBTOTAL** of Receipts This Page (optional) .....

135.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Eleanor B. Blaylock

Mailing Address 9439 Gay Lane

City

State

Zip Code

Oil City

LA

71061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Burke & Burke Insurance  
Mktg. Inc.

Occupation

Agency Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030895

Amount of Each Receipt this Period

105.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. James R. Christensen, Jr.

Mailing Address 440 Regency Pkwy Dr #210A

City

State

Zip Code

Omaha

NE

68114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSOURCE, Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8030903

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Terry K. Headley

Mailing Address 20704 Meadow Ridge Dr

City

State

Zip Code

Springfield

NE

68059-7086

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Headley / Scott & Associa-  
tes

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031045

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional) .....

418.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Steve R. Klaers

Mailing Address 7860 Alden Way

City

Fridley

State

MN

Zip Code

55101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
H. Beck - Capital Fin. Gr-  
oup

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031065

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert J. Hollander

Mailing Address 904 Rockhurst Dr.

City

Lincoln

State

NE

Zip Code

68510-4114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Midlands Financial Benefi-  
ts

Occupation

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031097

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard D. Kimmel

Mailing Address 6525 Bellaire Drive S

City

Ft Worth

State

TX

Zip Code

76132-1138

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031105

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

134.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Larry R. Lee

Mailing Address 25106 Cineria

City

Lake Forest

State

CA

Zip Code

92630-3307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Financial Diligence Partners

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031143

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. John B. Kearns

Mailing Address 1802 First Ave

City

Scottsbluff

State

NE

Zip Code

69361

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jolliffe Capital, Inc.

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031211

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. William A. Hume

Mailing Address 1075 Woodfield Lane

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Companies

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031359

Amount of Each Receipt this Period

45.00

**SUBTOTAL** of Receipts This Page (optional) .....

129.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. A. Ainslie Stanford

Mailing Address 10024 S. Louisville Ave

City

Tulsa

State

OK

Zip Code

74137-5221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual Finan-  
cial Network

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation

Financial Representative

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031441

Amount of Each Receipt this Period

50.40

**B.**

Full Name (Last, First, Middle Initial)

Ms. Cylinda A. Clark

Mailing Address 4002 San Mateo

City

Plano

State

TX

Zip Code

75093-6618

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
A&H Benefits Employee Ben-  
efits, Inc.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation

Sales Rep

Aggregate Year-to-Date ▼

267.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031569

Amount of Each Receipt this Period

44.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert E. Ross

Mailing Address 3918 S. Lisbon Way

City

Aurora

State

CO

Zip Code

80013-6032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ross South Metro Agency,  
Inc.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation

President & CEO

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031605

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

136.90

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. James A. Shalek

Mailing Address 1706 Candleberry Lane

City

Yorkville

State

IL

Zip Code

60560-5810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031607

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. D. David Russell

Mailing Address 8461 Eagle Preserve Way

City

Sarasota

State

FL

Zip Code

34241-9449

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rogers Benefit Group

Occupation

Regional Mgr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031639

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Brian E. O'Brien

Mailing Address 1651 Wolf Run Dr.

City

Richfield

State

WI

Zip Code

53076-9686

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Principal Financial  
Group

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031641

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

185.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Melville D.K. Jones

Mailing Address P.O. Box 1391

City

Puunene

State

HI

Zip Code

96784

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Transamerica Life Insuran-  
ce Companies

Occupation

Branch Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031651

Amount of Each Receipt this Period

37.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Lester E. Westgard

Mailing Address 2714 26th Ave SW

City

Fargo

State

ND

Zip Code

58103-5006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Principal Financial  
Group

Occupation

Special Marketing Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031715

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael W. Struebing

Mailing Address 16112 Parker Street

City

Omaha

State

NE

Zip Code

68118-2429

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heritage Financial Servic-  
es, LLC

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031749

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

147.50

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. C. Robert Brown, Sr.

Mailing Address 8675 WestCott

City

Germantown

State

TN

Zip Code

38138-7738

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UCL Financial Group

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031767

Amount of Each Receipt this Period

62.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. C. Wayne Perkins

Mailing Address 171A County Road 198

City

Oxford

State

MS

Zip Code

38655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southern Farm Bureau

Occupation  
Agency Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031801

Amount of Each Receipt this Period

37.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Ronald L. Gay

Mailing Address 1106 Deacon Drive

City

College Station

State

TX

Zip Code

77845

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brown & Company Insurance  
Services

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031803

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

142.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Thomas P. Cunningham

Mailing Address 4292 Rangeview Drive

City

State

Zip Code

Billings

MT

59106-4738

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Farm Bureau Financial Ser-  
vices

Occupation

Agency Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031853

Amount of Each Receipt this Period

50.40

**B.**

Full Name (Last, First, Middle Initial)

Mr. David W. Daigle

Mailing Address 5300 Stone Place Ave

City

State

Zip Code

Gillette

WY

82718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mountain West Farm Bureau

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031857

Amount of Each Receipt this Period

21.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Lane Boozer

Mailing Address 1400 N Corinth St Ste 109

City

State

Zip Code

Corinth

TX

76208-5444

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Don Boozer & Assoc.

Occupation

Vice President - Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031893

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

121.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Sharon L. Sparling

Mailing Address P.O. Box 1914

City

Mount Vernon

State

WA

Zip Code

98273-1914

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

PRODUCER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8031959

Amount of Each Receipt this Period

45.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. James John Silbernagel

Mailing Address W 2329 Capital Drive

City

Campbellsport

State

WI

Zip Code

53010-3010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Silbernagel & Jäsen Finan-  
cial

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032035

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. John Palladino, Jr.

Mailing Address 15060 Becky Lane

City

Monte Sereno

State

CA

Zip Code

95030-2106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Link-Allen Benefit Group

Occupation

V.P

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032043

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

147.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Alan R. Zalewski

Mailing Address 6908 North 27th Street

City

Tacoma

State

WA

Zip Code

98407-1002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Burnley Wilson Associates

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032069

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Earl A. Thompson

Mailing Address 21014 Pricewood Manor Ct.

City

Cypress

State

TX

Zip Code

77433

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032121

Amount of Each Receipt this Period

52.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. David L. Sparks

Mailing Address PO Box 3509

City

Hickory

State

NC

Zip Code

28603

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capital Concepts

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032181

Amount of Each Receipt this Period

115.50

**SUBTOTAL** of Receipts This Page (optional) .....

217.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 69 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Edward F. Randolph

Mailing Address 1515 Mill Bay Road  
Suite A

City State Zip Code  
Kodiak AK 99615-6233

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Edward F Randolph Ins. Ag-  
ency

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032239

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Richard R. Rios

Mailing Address 8720 El Chapul Way

City State Zip Code  
Fair Oaks CA 95628-5454

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Brecek & Young Advisors

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032279

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Cliff F. Wilson

Mailing Address 1458 W. Bahia Court

City State Zip Code  
Gilbert AZ 85233-5600

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Southeast Arizona Ins. SE-  
rvices, LTD

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032363

Amount of Each Receipt this Period

126.00

**SUBTOTAL** of Receipts This Page (optional) .....

218.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Robert A. Styrkowicz

Mailing Address 361 Pines Blvd.

City

Lake Villa

State

IL

Zip Code

60046-6600

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance

Occupation

Exclusive Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032443

Amount of Each Receipt this Period

67.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Michael J. Edens

Mailing Address 1012 Endicott

City

Chattanooga

State

TN

Zip Code

37405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
John Hancock Financial Se-  
rvices

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032473

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Miguel Paredes

Mailing Address 5927 Tamarisk

City

San Luis Obispo

State

CA

Zip Code

93401-8281

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Neal Truesdale Ins.

Occupation

Benefits

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032623

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

151.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. James E. Mitchell

Mailing Address 3990 Jones Ln

City

Bellingham

State

WA

Zip Code

98225-8544

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mitchell Financial Services

Occupation  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032689

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. A. Duer Pierce, Jr.

Mailing Address 5818 Kennett Pike

City

Wilmington

State

DE

Zip Code

19807-1116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Financial House

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032737

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Gary M. Owens

Mailing Address PO Box 835

City

Sultan

State

WA

Zip Code

98294

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gary M Owens Insurance Agency Inc

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032741

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

142.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Brian D. Boesiger

Mailing Address 7021 S. 33rd Street

City

Lincoln

State

NE

Zip Code

68516-4886

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Benefit Management

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032795

Amount of Each Receipt this Period

37.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Harry E. Sechman

Mailing Address 13 Beechwood Dr

City

Rutland

State

MA

Zip Code

01543-1751

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
H.E. Sechman Retirement  
Planning

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032951

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. John W. Wheeler, Jr.

Mailing Address 1075 Aster Ln.

City

West Chicago

State

IL

Zip Code

60185-1750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8032959

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

122.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Daniel J. Wells

Mailing Address 18830 Los Hermanos Ranch Rd

City

Valley Center

State

CA

Zip Code

92082-6808

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Daniel Wells Insurance &  
Financial Ser

Occupation

Owner/Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8033013

Amount of Each Receipt this Period

47.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert J. Morales

Mailing Address 1125 Wyoming Avenue

City

Reno

State

NV

Zip Code

89503-3342

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brecek & Young Advisors,  
Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8033029

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Roger L. Owens

Mailing Address 104 Landing Lane

City

Elkton

State

MD

Zip Code

21921-5204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rymark Financial Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8033041

Amount of Each Receipt this Period

62.50

**SUBTOTAL** of Receipts This Page (optional) .....

170.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. James W. Simons

Mailing Address 1712 13th Street NW

City

Minot

State

ND

Zip Code

58703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
First Command Financial  
Planning

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8033061

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Carolyn R. Watson

Mailing Address 2032 Hollis

City

Abilene

State

TX

Zip Code

79605-5726

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ohio National Financial  
Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8033091

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Boyd Lee Williams

Mailing Address 7023 W. Williamette Ave

City

Kennewick

State

WA

Zip Code

99336-1280

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kansas City Life Insurance  
Company

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8033131

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional) .....

278.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Shelley M. Rowe

Mailing Address 5908 E. Conservation Dr.

City

Longmont

State

CO

Zip Code

80504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Generations Financial Res-  
ources

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8033133

Amount of Each Receipt this Period

37.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Steven M. Stratton

Mailing Address 17131 Parkview Dr

City

Morgan Hill

State

CA

Zip Code

95037-6606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Financial & Insurance Ser-  
vices

Occupation  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8033179

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Dennis P. Sunderman

Mailing Address 2325 Jeans Ct

City

Signal Hill

State

CA

Zip Code

90755-4047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eldercare Insurance Servi-  
ces

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8033231

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

184.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Joseph A. Sztapka

Mailing Address 3705 S. Judy Ave

City

Sioux Falls

State

SD

Zip Code

57103-7248

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Modern Woodmen of America

Occupation

Agency Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8033341

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Benson B. Terrell, Jr.

Mailing Address 9261 Lanier Rd

City

Lake Charles

State

LA

Zip Code

70607-0352

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Firm of Louisiana

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8033369

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Paul Adams

Mailing Address 5101 Missy Maric Lane

City

Las Vegas

State

NV

Zip Code

89130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clearline Financial Group

Occupation

Field Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8033781

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

275.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 77 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Joseph L Morton, III

Mailing Address 5487 N Bach

City

Meridian

State

ID

Zip Code

83642

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Intermountain Legal Group

Occupation

Attorney At Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8033849

Amount of Each Receipt this Period

126.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Melvin Chlewich

Mailing Address 316 Chanticleer Dr

City

Cherry Hill

State

NJ

Zip Code

08003-4824

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Chlewich Financial Resou-  
rces

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8033979

Amount of Each Receipt this Period

36.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Ronald J. Adams

Mailing Address 3819 Country Haven Ct

City

Sacramento

State

CA

Zip Code

95821-2800

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ronald Adams Fin. Planning  
Group

Occupation

Financial & Estate Planner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8033989

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

204.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. George W. Williams, Jr.

Mailing Address 4109 Woodway Dr

City

Monroe

State

LA

Zip Code

71201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Benefit Plan Service

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8034135

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Sharon G. Heierman

Mailing Address 2990 Kemp Rd

City

Havana

State

FL

Zip Code

32333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NAIFA - Florida

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8034403

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael J. Bussard

Mailing Address 5256 Lysander Lane

City

Brentwood

State

TN

Zip Code

37027-3110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pacific Life Insurance Co-  
mpany

Occupation  
Regional Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 9

Transaction ID: 8034489

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

334.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. David L. Belk

Mailing Address 2 Bay Tree Court

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Belk Financial Group

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8034503

Amount of Each Receipt this Period

46.20

**B.**

Full Name (Last, First, Middle Initial)

Mr. Jack B. Turner

Mailing Address 310 Fairway Drive

City

Clarksville

State

TN

Zip Code

37043-4729

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jack B. Turner & Associates, Inc.

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 9

Transaction ID: 8034525

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Marilyn Lewis

Mailing Address 321 West Winnie Lane #106

City

Carson City

State

NV

Zip Code

89703-2154

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Companies

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 9

Transaction ID: 8034571

Amount of Each Receipt this Period

720.00

**SUBTOTAL** of Receipts This Page (optional) .....

1266.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Christopher Luke Simons

Mailing Address 713 Carper Dr

City

Artesia

State

NM

Zip Code

88210-2344

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Simons and Associates

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8034623

Amount of Each Receipt this Period

50.40

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840-2201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 2 / 2 0 0 9

Transaction ID: 8034641

Amount of Each Receipt this Period

416.66

**C.**

Full Name (Last, First, Middle Initial)

Mr. Daniel J. Shanahan

Mailing Address 4228 Timberwood Dr.

City

Raleigh

State

NC

Zip Code

27612-3630

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation

Regional\_Managing\_Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 2 / 2 0 0 9

Transaction ID: 8034653

Amount of Each Receipt this Period

275.00

**SUBTOTAL** of Receipts This Page (optional) .....

742.06

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Jack J. Barry

Mailing Address 222 SW Columbia St Ste 825

City

Portland

State

OR

Zip Code

97201-6640

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oregon Financial Services  
Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 9 / 2 0 0 9

Transaction ID: 8034663

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. David Burstin

Mailing Address 1435 Bennington Avenue

City

Pittsburgh

State

PA

Zip Code

15217-1138

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brand, Burstin, Runnette

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 0 9

Transaction ID: 8034897

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. James C. Clabuesch

Mailing Address 11375 Fairway Dr

City

Roscommon

State

MI

Zip Code

48653

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clabuesch Financial Servi-  
ces

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8035027

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Donna Saarem

Mailing Address 2886 Cedar Ridge Dr

City

Reno

State

NV

Zip Code

89523-2866

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Co.

Occupation

Agency Field Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 0 9

Transaction ID: 8035043

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Christine L. Martin

Mailing Address 492 Freedom Ave

City

Billings

State

MT

Zip Code

59102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Humana

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

Transaction ID: 8035073

Amount of Each Receipt this Period

50.40

**C.**

Full Name (Last, First, Middle Initial)

Ms. Patricia G. Martin

Mailing Address 2125 Cypress Drive

City

Culpeper

State

VA

Zip Code

22701-4025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Patricia G. Martin Insurance

Occupation

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 5 / 2 0 0 9

Transaction ID: 8035091

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1800.40

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 110

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Arthur J. Glatfelter, Jr.

Mailing Address P.O. Box 2726

City

York

State

PA

Zip Code

17405-2726

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Glatfelter Insurance Group

Occupation

Ch. of the Board

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	9	

Transaction ID: 8035125

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Karl W. Albrecht

Mailing Address 1745 Balsam Way

City

Milford

State

MI

Zip Code

48381-3391

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
ACTION BENEFITS

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	9	/	2	0	9	

Transaction ID: 8035249

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Stephen J. Gowers

Mailing Address 2809 Avenue of The Woods

City

Louisville

State

KY

Zip Code

40241-6233

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Capitas Financial, LLC

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	9	

Transaction ID: 8035411

Amount of Each Receipt this Period

48.00

**SUBTOTAL** of Receipts This Page (optional) .....

1048.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Ben C. Kaufmann

Mailing Address 125 Sycamore Rd

City

Lexington

State

KY

Zip Code

40502-1841

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
You're Outta Here

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 9

Transaction ID: 8035421

Amount of Each Receipt this Period

786.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. James R. Bertine

Mailing Address 2935 S. Columbus St.

City

Arlington

State

VA

Zip Code

22206-1412

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Knights of Columbus

Occupation

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 9

Transaction ID: 8035431

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael L. Kerley

Mailing Address 2901 Telestar Court

City

Falls Church

State

VA

Zip Code

22042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NAIFA

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

677.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 9

Transaction ID: 8035461

Amount of Each Receipt this Period

52.25

**SUBTOTAL** of Receipts This Page (optional) .....

1088.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. William R. Anderson

Mailing Address 1842 Vermont Ave NW

City

Washington

State

DC

Zip Code

20001-5006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NAIFA

Occupation

Sr VP Law & Govt Rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.96

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 9

Transaction ID: 8035465

Amount of Each Receipt this Period

20.83

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert W. Smith

Mailing Address 244 N Rose Av

City

Park Ridge

State

IL

Zip Code

60068-2958

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
First Midwest Insurance  
Group LLC

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 9

Transaction ID: 8035487

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. C. Robert Brown, Sr.

Mailing Address 8675 WestCott

City

Germantown

State

TN

Zip Code

38138-7738

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UCL Financial Group

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 9

Transaction ID: 8035497

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

570.83

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. James V. Hunt, Sr.

Mailing Address 716 Enquirer Ave

City

Nashville

State

TN

Zip Code

37205-3724

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Benefit Communications,  
Inc.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 0 9

Transaction ID: 8035499

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Brian P. Walsh

Mailing Address 547 Wayfield

City

Wynnewood

State

PA

Zip Code

19096-2615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Walsh & Nicholson Financi-  
al Group

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 9

Transaction ID: 8035519

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael L. Kerley

Mailing Address 2901 Telestar Court

City

Falls Church

State

VA

Zip Code

22042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NAIFA

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.75

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 9

Transaction ID: 8035535

Amount of Each Receipt this Period

52.25

**SUBTOTAL** of Receipts This Page (optional) .....

552.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Lawrence L. Kitts

Mailing Address 10842 Mount CurveRd

City

Eden Prairie

State

MN

Zip Code

55347-2908

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Horizon Agency Inc.

Occupation

Agency Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 1 / 2 0 0 9

Transaction ID: 8035561

Amount of Each Receipt this Period

850.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. William R. Anderson

Mailing Address 1842 Vermont Ave NW

City

Washington

State

DC

Zip Code

20001-5006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NAIFA

Occupation

Sr VP Law & Govt Rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 9

Transaction ID: 8035577

Amount of Each Receipt this Period

20.83

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael J. Edens

Mailing Address 1012 Endicott

City

Chattanooga

State

TN

Zip Code

37405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
John Hancock Financial Se-  
rvices

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 0 9

Transaction ID: 8035585

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

970.83

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. C. Gibbs Smith, Jr.

Mailing Address 2028 Priest Rd

City

Nashville

State

TN

Zip Code

37215-5116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Benefit Programs Inc.

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 9

Transaction ID: 8035589

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Dean A. Hempel

Mailing Address P O Box 1270

City

Seymour

State

TN

Zip Code

37865-1270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNIFI Companies

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 9

Transaction ID: 8035597

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Tom McDonald

Mailing Address 413 Hope Ave

City

Franklin

State

TN

Zip Code

37067-2639

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tennessee Farmers Insuran-  
ce Company

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 9

Transaction ID: 8035617

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Gabriel N. Smith

Mailing Address 191 Spyglass Way

City

Hendersonville

State

TN

Zip Code

37075

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 9

Transaction ID: 8035675

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Edward R. Clink

Mailing Address 1263 W. Square Lake Rd.

City

Bloomfield Hills

State

MI

Zip Code

48302-0845

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ed Clink & Associates

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 9

Transaction ID: 8035731

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. William P. Krause

Mailing Address 1765 Elbow Lane

City

Allentown

State

PA

Zip Code

18103-9654

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Krause Financial Services

Occupation

Financial Services Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 9

Transaction ID: 8035735

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

425.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 110

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Robert L. Tedoldi, Sr.

Mailing Address 1438 Woodstream Drive

City

Oldsmar

State

FL

Zip Code

34677-4832

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Infocus Financial

Occupation

Certified Financial Planner

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 7 / 2 0 0 9

Transaction ID: 8035737

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

31063.27

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 91 / 110

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b> Full Name (Last, First, Middle Initial) Betty Sutton For Congress	<b>Transaction ID:</b> 7903272 <b>Date of Disbursement</b>
Mailing Address 1700 W. Market St. #155	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 3 / 2 0 0 9</div> </div>
City Akron State OH Zip Code 44313	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div>1000.00</div>
Candidate Name Rep. Betty Sutton	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Lynn Jenkins For Congress	<b>Transaction ID:</b> 7909237 <b>Date of Disbursement</b>
Mailing Address P.O. Box 1441	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 9</div> </div>
City Topeka State KS Zip Code 66601	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div>2500.00</div>
Candidate Name Rep. Lynn Jenkins	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Steve Austria For Congress	<b>Transaction ID:</b> 7909238 <b>Date of Disbursement</b>
Mailing Address 2537 Obetz Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 9</div> </div>
City Beavercreek State OH Zip Code 45434	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div>1000.00</div>
Candidate Name Rep. Steve Austria	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ryan For Congress

Mailing Address P. O. Box 1919

City  
Janesville

State  
WI

Zip Code  
53547

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. Paul Ryan

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

2010

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI

District: 01

Transaction ID: 7920098

Date of Disbursement

06 / 08 / 2009

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Friends Of Kent Conrad

Mailing Address PO Box 812

City  
Bismarck

State  
ND

Zip Code  
58502

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Sen. Kent Conrad

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For:

2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: ND

District:

Transaction ID: 7923218

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Levin For Congress

Mailing Address PO Box 37

City  
Roseville

State  
MI

Zip Code  
48066

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. Sander M. Levin

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

2010

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI

District: 12

Transaction ID: 7923220

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Larson For Congress

Mailing Address 29 Ruff Circle

City  
Glastonbury

State  
CT

Zip Code  
06033

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. John B. Larson

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

2010

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT

District: 01

Transaction ID: 7923221

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Guthrie For Congress

Mailing Address PO Box 9639

City  
Bowling Green

State  
KY

Zip Code  
42102

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. Brett Guthrie

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

2010

☒ Primary ☐ General  
☐ Other (specify) ▼

State: KY

District: 02

Transaction ID: 7923222

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Cantor For Congress

Mailing Address P. O. Box 17813

City  
Richmond

State  
VA

Zip Code  
23226

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. Eric I. Cantor

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

2010

☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA

District: 07

Transaction ID: 7923223

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Roskam For Congress Committee

Mailing Address P. O. Box 713

City  
Wheaton

State  
IL

Zip Code  
60187

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. Peter Roskam

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

2010

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL

District: 06

**Transaction ID:** 7923224

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Evan Bayh Committee

Mailing Address 850 Fort Wayne Avenue

City  
Indianapolis

State  
IN

Zip Code  
46204

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Sen. Evan Bayh

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For:

2010

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN

District:

**Transaction ID:** 7923226

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Bennet For Colorado

Mailing Address 1900 Grant Street Suite 1170

City  
Denver

State  
CO

Zip Code  
80203

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Sen. Michael F. Bennet

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For:

2010

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CO

District:

**Transaction ID:** 7923227

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Shelley Moore Capito For Congress

Mailing Address P.O. Box 11519

City Charleston State WV Zip Code 25339

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Shelley Moore Capito

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2010 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: WV District: 02

Transaction ID: 7923228

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
Adler For Congress

Mailing Address 14 Knightswood Drive

City Marlton State NJ Zip Code 08053

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. John Herbert Adler

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2010 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 03

Transaction ID: 7923230

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Friends Of John Tanner

Mailing Address Post Office Box 1994

City Union City State TN Zip Code 38281

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. John S. Tanner

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2010 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 08

Transaction ID: 7923232

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b> Full Name (Last, First, Middle Initial) John Campbell For Congress	<b>Transaction ID:</b> 7923233 <b>Date of Disbursement</b>
Mailing Address 4590 Macarthur Boulevard Suite 500	<input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>
City Newport Beach State CA Zip Code 92660	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<input type="text" value="2500.00"/>
Candidate Name Rep. John Campbell	<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 48	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Bob Corker for Senate, Inc.	<b>Transaction ID:</b> 7923234 <b>Date of Disbursement</b>
Mailing Address PO Box 848	<input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>
City Chatanooga State TN Zip Code 37401	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<input type="text" value="1000.00"/>
Candidate Name Bob Corker	<input type="text" value="011"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Paul Hodes For Congress	<b>Transaction ID:</b> 7923235 <b>Date of Disbursement</b>
Mailing Address 26 South Main Street, #253	<input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>
City Concord State NH Zip Code 03301	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<input type="text" value="1000.00"/>
Candidate Name Rep. Paul W. Hodes	<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....**4500.00****TOTAL** This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Allyson Schwartz For Congress

Mailing Address P.O. Box 2232

City  
JenkintownState  
PAZip Code  
19046

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. Allyson Y. Schwartz

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 13

Transaction ID: 7923237

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	0	9

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Mchenry For Congress

Mailing Address PO Box 1406

City  
HickoryState  
NCZip Code  
28603

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. Patrick T. McHenry

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 10

Transaction ID: 7923238

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	0	9

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Melissa Bean For Congress

Mailing Address PO Box 3068

City  
BarringtonState  
ILZip Code  
60010

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. Melissa L. Bean

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 08

Transaction ID: 7923239

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	0	9

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

4500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Cantor For Congress

Mailing Address P. O. Box 17813

City  
Richmond

State  
VA

Zip Code  
23226

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. Eric I. Cantor

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

2010

☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA

District: 07

Transaction ID: 7923242

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Scott Murphy for Congress

Mailing Address 615 Glen Street

City  
Glens Falls

State  
NY

Zip Code  
12801

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Mr. Scott Murphy

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

2010

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY

District: 20

Transaction ID: 7923243

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Coburn for Senate Committee

Mailing Address 3300 West Okmulgee  
P.O. Box 977

City  
Muskogee

State  
OK

Zip Code  
74401

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Thomas Coburn

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For:

2010

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OK

District:

Transaction ID: 7923244

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b> Full Name (Last, First, Middle Initial) Richard Burr Committee	<b>Transaction ID:</b> 7923245 <b>Date of Disbursement</b>																				
Mailing Address      Post Office Box 5928	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	9		2	0	0	9												
City      State      Zip Code Winston-Salem      NC      27113	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Sen. Richard M. Burr	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought:      Disbursement For:      2010 <input type="checkbox"/> House <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Senate <input type="checkbox"/> Other (specify) ▼ <input type="checkbox"/> President State: NC      District:																					
<b>B.</b> Full Name (Last, First, Middle Initial) Lisa Murkowski For Us Senate	<b>Transaction ID:</b> 7923246 <b>Date of Disbursement</b>																				
Mailing Address      PO Box 100847	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	9		2	0	0	9												
City      State      Zip Code Anchorage      AK      99510	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Sen. Lisa Murkowski	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought:      Disbursement For:      2010 <input type="checkbox"/> House <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Senate <input type="checkbox"/> Other (specify) ▼ <input type="checkbox"/> President State: AK      District:																					
<b>C.</b> Full Name (Last, First, Middle Initial) Demint For Senate Committee Inc	<b>Transaction ID:</b> 7923247 <b>Date of Disbursement</b>																				
Mailing Address      PO Box 12425	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	9		2	0	0	9												
City      State      Zip Code Columbia      SC      29211	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Sen. James W. DeMint	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought:      Disbursement For:      2010 <input type="checkbox"/> House <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Senate <input type="checkbox"/> Other (specify) ▼ <input type="checkbox"/> President State: SC      District:																					

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 100 / 110

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	<p>Full Name (Last, First, Middle Initial) Georgians For Isakson</p> <p>Mailing Address Post Office Box 250116</p> <p>City Atlanta State GA Zip Code 30325</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name Sen. Johnny Isakson</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: GA District:</p>	<p><b>Transaction ID:</b> 7923248</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 2px;">2500.00</span></p>
<b>B.</b>	<p>Full Name (Last, First, Middle Initial) John Thune for South Dakota</p> <p>Mailing Address PO Box 516 PO Box 516</p> <p>City Sioux Falls State SD Zip Code 57101</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name John Thune</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: SD District:</p>	<p><b>Transaction ID:</b> 7923249</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>
<b>C.</b>	<p>Full Name (Last, First, Middle Initial) Joseph Cao For Congress</p> <p>Mailing Address PO Box 56156</p> <p>City New Orleans State LA Zip Code 70156</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name Rep. Anh 'Joseph' Cao</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: LA District: 02</p>	<p><b>Transaction ID:</b> 7923489</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>

**SUBTOTAL** of Disbursements This Page (optional) .....4500.00**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 101 / 110

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Friends Of Dave Reichert

Mailing Address P. O. Box 53322

City  
Bellevue

State  
WA

Zip Code  
98015

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. David George Reichert

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

2010

☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA

District: 08

Transaction ID: 7923493

Date of Disbursement

06 / 10 / 2009

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Mccotter Congressional Committee

Mailing Address P.O. Box 530788

City  
Livonia

State  
MI

Zip Code  
48153

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. Thaddeus G. McCotter

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

2010

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI

District: 11

Transaction ID: 7923494

Date of Disbursement

06 / 10 / 2009

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Friends Of Erik Paulsen

Mailing Address P.O. Box 44369  
250 Prairie Center Drive

City  
Eden Prairie

State  
MN

Zip Code  
55344

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. Erik Paulsen

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

2010

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN

District: 03

Transaction ID: 7923495

Date of Disbursement

06 / 10 / 2009

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 102 / 110

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b> Full Name (Last, First, Middle Initial) Lee Terry For Congress	<b>Transaction ID:</b> 7923496 <b>Date of Disbursement</b>																				
Mailing Address PO Box 540098	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	0		2	0	0	9												
City Omaha State NE Zip Code 68154	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Candidate Name Rep. Lee Terry	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) McCotter Congressional Committee	<b>Transaction ID:</b> 7923497 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 530788	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	0		2	0	0	9												
City Livonia State MI Zip Code 48153	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name Rep. Thaddeus G. McCotter	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 11	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Moore For Congress	<b>Transaction ID:</b> 7923498 <b>Date of Disbursement</b>																				
Mailing Address PO Box 16646	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	0		2	0	0	9												
City Milwaukee State WI Zip Code 53216	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Rep. Gwen Moore	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 103 / 110

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Dave Camp For Congress 2010

Mailing Address 5915 Eastman Avenue  
Suite 100

City State Zip Code  
Midland MI 48640

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. David Lee Camp

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 04

Transaction ID: 7931022

Date of Disbursement

06 / 15 / 2009

Amount of Each Disbursement this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
Kilroy For Congress

Mailing Address 550 East Walnut Street  
Ste 305

City State Zip Code  
Columbus OH 43215

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Mary Jo Kilroy

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 15

Transaction ID: 7931023

Date of Disbursement

06 / 15 / 2009

Amount of Each Disbursement this Period

1250.00

**C.** Full Name (Last, First, Middle Initial)  
Neugebauer Congressional Committee

Mailing Address PO Box 54175

City State Zip Code  
Lubbock TX 79453

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Robert R. Neugebauer

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 19

Transaction ID: 7931672

Date of Disbursement

06 / 15 / 2009

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 104 / 110

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b> Full Name (Last, First, Middle Initial) Virginia Foxx For Congress	<b>Transaction ID:</b> 7976550 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 1100	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	7		2	0	0	9												
City Clemmons State NC Zip Code 27012	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Rep. Virginia Foxx	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Cantor For Congress	<b>Transaction ID:</b> 7984647 <b>Date of Disbursement</b>																				
Mailing Address P. O. Box 17813	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	7		2	0	0	9												
City Richmond State VA Zip Code 23226	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Void - Cantor For Congress	<table border="1"> <tr> <td>-1000.00</td> </tr> </table>	-1000.00																			
-1000.00																					
Candidate Name Rep. Eric I. Cantor	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) ERIC PAC	<b>Transaction ID:</b> 7984652 <b>Date of Disbursement</b>																				
Mailing Address 209 Pennsylvania Avenue, SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	7		2	0	0	9												
City Washington State DC Zip Code 20003	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 105 / 110

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Pennsylvanians For Kanjorski

Mailing Address 103 South Hanover Street

City  
Nanticoke

State  
PA

Zip Code  
18634

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. Paul E. Kanjorski

Office Sought:

☒ House

☐ Senate

☐ President

State: PA

District: 11

Disbursement For:

2010

☒ Primary

☐ General

☐ Other (specify) ▼

Transaction ID: 7984653

Date of Disbursement

06 / 17 / 2009

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Friends Of Chris Dodd

Mailing Address PO Box 270701

City  
West Hartford

State  
CT

Zip Code  
06127

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Sen. Christopher J. Dodd

Office Sought:

☐ House

☒ Senate

☐ President

State: CT

District:

Disbursement For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Transaction ID: 7984654

Date of Disbursement

06 / 17 / 2009

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Rob Wittman For Congress

Mailing Address PO Box 999

City  
Montross

State  
VA

Zip Code  
22520

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. Robert Wittman

Office Sought:

☒ House

☐ Senate

☐ President

State: VA

District: 01

Disbursement For:

2010

☒ Primary

☐ General

☐ Other (specify) ▼

Transaction ID: 7987802

Date of Disbursement

06 / 19 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

5500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 106 / 110

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b> Full Name (Last, First, Middle Initial) Perlmutter For Congress	<b>Transaction ID:</b> 7989848 <b>Date of Disbursement</b>
Mailing Address 3440 Youngfield Street #264	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 2 / 2 0 0 9</div> </div>
City State Zip Code Wheat Ridge CO 80033	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div>2500.00</div>
Candidate Name Rep. Edwin Perlmutter	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Allyson Schwartz For Congress	<b>Transaction ID:</b> 8006760 <b>Date of Disbursement</b>
Mailing Address P.O. Box 2232	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 5 / 2 0 0 9</div> </div>
City State Zip Code Jenkintown PA 19046	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div>500.00</div>
Candidate Name Rep. Allyson Y. Schwartz	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Joe Donnelly For Congress	<b>Transaction ID:</b> 8011223 <b>Date of Disbursement</b>
Mailing Address PO Box 1961	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 6 / 2 0 0 9</div> </div>
City State Zip Code South Bend IN 46634	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div>1000.00</div>
Candidate Name Rep. Joseph Donnelly	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Cooper For Congress

Mailing Address C/O Davidson, Golden & Lundy  
P.O. Box 927

City State Zip Code  
Brentwood TN 37024

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Jim Cooper

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 05

Transaction ID: 8012048

Date of Disbursement

06 / 30 / 2009

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Bachus For Congress Committee

Mailing Address P.O. Box 131134

City State Zip Code  
Birmingham AL 35213

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Spencer Thomas Bachus, III

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL District: 06

Transaction ID: 8012049

Date of Disbursement

06 / 30 / 2009

Amount of Each Disbursement this Period

4000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

69250.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 108 / 110

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Dr. Robert Cox

Mailing Address 1733 Keuka Drive #101

City State Zip Code  
New Port Richey FL 34655

Purpose of Disbursement

Void - Dr. Robert Cox

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 7924987

Date of Disbursement

06 / 10 / 2009

Amount of Each Disbursement this Period

-50.00

Void - Dr. Robert Cox

SUBTOTAL of Disbursements This Page (optional) .....

-50.00

TOTAL This Period (last page this line number only) .....

-50.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 109 / 110

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Wachovia

Mailing Address P.O. box 40031

City  
Roanoke

State  
VA

Zip Code  
24022-0031

Purpose of Disbursement  
bank fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 8069320

Date of Disbursement

06 / 24 / 2009

Amount of Each Disbursement this Period

816.70

bank fees

**B.**

Full Name (Last, First, Middle Initial)

NAIFA

Mailing Address 2901 Telestar Ct

City  
Falls Church

State  
VA

Zip Code  
22042

Purpose of Disbursement  
Salary, Benefits, supplies, copies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 8069323

Date of Disbursement

06 / 26 / 2009

Amount of Each Disbursement this Period

1428.21

Salary, Benefits, supplies, copies

**SUBTOTAL** of Disbursements This Page (optional) .....

2244.91

**TOTAL** This Period (last page this line number only) .....

2244.91

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 110 / 110

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial) of Debtor or CreditorNational Association of Insurance and Financial Advisors  
Political Action Committee

Nature of Debt (Purpose):

Salary, Benefits, supplies,  
copies

Mailing Address 2901 telestar Ct

City

State

ZIP Code

Falls Church

VA

22042

Outstanding Balance Beginning This Period

31537.80

Transaction ID: 8070289

Amount Incurred This Period

0.00

Payment This Period

1428.21

Outstanding Balance at Close of This Period

30109.59

1) **SUBTOTALS** This Period This Page (optional)..... ▶

30109.59

2) **TOTALS** This Period (last page this line number only)..... ▶

30109.59

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

30109.59